CLAIMS ONLY	Application Number 10/52473	Filing Date
	Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1			1				51							
2							52							
3				1			53							
4				2			54							
5				2			55							
6				2			56							
7				1			57							
8				1			58							
9				1			59							
10				1			60							
11				1			61							
12							62							
13				1			63							
14			1				64							
15				2			65							
16				2			66							
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46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep			2				Total Indep							
Total Depend			24				Total Depend							
Total Claims			26				Total Claims							